• •	•				011	PE			
Combined Declaration	For Patent	Application	n and	Power of Attorney		. 4	85910	RNEY D SLP	OCKET
As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, that and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: STORAGE PHOSPHOR MEDIA SERVICE AND JAM ACCESS IN A CR READER									
The specification of which (check	only one item be	low):							
is attached hereto.									
X was filed as United States Application Serial No. 10/767,570 on 01-29-2004 and was amended on (if applicable).									
was filed as PCT international application Number on and was amended on (if applicable).									
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-*d) or 365 (b) of any foreign application(s) for patent or inventor's certificate, or (365 (a) of any PCT international application(s) which designates at least one country other than the United States of America, listed below and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:									
PRIOR FOREIGN/PCT APPLI	CATION(S) ANI	ANY PRIORI	TY CLA	IMS UNDER 35 U.S.C. 1	19:				
COUNTRY (if PCT, indicate PCT)	A	PLICATION NUMBER		DATE OF FILING (month/dayyear)		· ·	PRIORITY CLAIMED I	JNDER 35 USC	§119 NO
							YES	<u> </u>	NO.
							YES		NO
I hereby claim the benefit under T						(s) listed	below:		
PRIOR PROVISIONAL APPLI	CATION(S) AN	D ANY PRIORI	TY CLA	IMS UNDER 35 U.S.C. §	119 (e):				
PROVISIONAL AI	PLICATION NUMBER				FILING DATE (mo	onth/day/year)			
I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:									
PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER 35USC§120:									
U.S. APPLICATIONS					STATUS (Check one)				
U.S. APPLICATION NUMBER		U.S. FILING DATE		PATENT	PATENTED PENDING		ABA	ANDONED	
<u></u>									
PCT APPLICATIONS DESIGNATING THE U.S.									
PCT APPLICATION NO. PCT FILING DAT		NG DATE		U.S. SERIAL NUMBERS ASSIGNED (if any)					
							·		

Combined Declaration For Patent Application and Power of Attorney (Continued)

ATTORNEY DOCKET

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company <u>Customer Not 11333</u> to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

)(nd Corresp	ondence to: Patent Legal S	Staff	Direct Telephone Calls to: (name and telephone number)		
		Eastman Kod 343 State Stre	Susan L. Parulski 585-477-4027			
		Rochester, N	Y 14650-2201	FAX: 585-477-4646		
T	FULL NAME OF INVENTOR	FAMILY NAME Urbon	FIRST GIVEN NAME Michael	SECOND GIVEN NAME P.		
Ī	RESIDENCE & CITIZENSHIP	CITY Churchville	STATE OR FOREIGN COUNTRY New York 14428 USA	COUNTRY OF CITIZENSHIP US		
ļ	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA		
†	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
ŀ	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
ŀ	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		
†	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
ŀ	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
ŀ	BUSINESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		
†	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
┟	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
ŀ	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		
†	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
ł	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
f	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		
†	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
ł	RESIDENCE &	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
.	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
7/14/04	DATE	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE